PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Continuing A Majority Party Action Committee (CAMPAC) 5915 Eastman Avenue ADDRESS (number and street) Suite 100 (Check if address is changed) Midland 48640-6824 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kim.holzhauer@ahpplc.com (Check if address is changed) Optional Second E-Mail Address |gwen.lang@ahpplc.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00350462 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kim Holzhauer Type or Print Name of Treasurer Kim Holzhauer [Electronically Filed] 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	raye Z
		Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	nplete the candidate
Nam Cano	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Wo Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Title or Position Treasurer

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FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam		<u> </u>
	lajority Party Action Committee (CAM	MPAC)
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
David Lee Camp		
Mailing Address	5905 Wimbledon Court	
	Midland	48642-7004
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representa	tive X Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the p	erson in possession of committee
Kim Holzł	nauer	
Full Name		
Mailing Address	5915 Eastman Avenue	
	Suite 100	
	Midland MI	48640-6824
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	989 - 835 - 7721
8. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Kim Holzh of Treasurer	nauer	
Mailing Address	5915 Eastman Avenue	<u>. , , , , , , , , , , , , , , , , , , ,</u>
. J	Suite 100	
	Midland	48640-6824
	CITY STATE	ZIP CODE

989

Telephone number

835

7721

Full Name of Designated Agent	Gwen D. Lang	
Mailing Address	5915 Eastman Avenue	
·	Suite 100	1 1 1 1
	Midland MI 48640-6824	-1
	CITY STATE ZIP CO	DE
Title or Position Assistant Treasu	urer	- 7721
Banks or Other	Depositories: List all banks or other depositories in which the committee deposits funds, holds account	nts, rents
	oxes or maintains funds.	
Name of Bank, D		
Name of Bank, D	Depository, etc. CHEMICAL BANK & TRUST 333 E Main Street	1 1 1
Name of Bank, C	Depository, etc. CHEMICAL BANK & TRUST	
	Depository, etc. CHEMICAL BANK & TRUST 333 E Main Street	
Name of Bank, D	CHEMICAL BANK & TRUST 333 E Main Street	
Name of Bank, C	CHEMICAL BANK & TRUST 333 E Main Street	- L
Name of Bank, C	CHEMICAL BANK & TRUST 333 E Main Street Midland MI 48640-6511 CITY STATE ZIP CO	- L
Name of Bank, C	CHEMICAL BANK & TRUST 333 E Main Street Midland MI 48640-6511 CITY STATE ZIP CO	- L
Name of Bank, C	CHEMICAL BANK & TRUST 333 E Main Street Midland MI 48640-6511 CITY STATE ZIP CO	DDE
Name of Bank, C	CHEMICAL BANK & TRUST 333 E Main Street Midland MI 48640-6511 CITY STATE ZIP CO	- L
Name of Bank, C	CHEMICAL BANK & TRUST 333 E Main Street Midland MI 48640-6511 CITY STATE ZIP CO	- L
Name of Bank, D	CHEMICAL BANK & TRUST 333 E Main Street Midland MI 48640-6511 CITY STATE ZIP CO	- L